FORM

D-2

Full name and complete mailing address of Political Committee:

Fax: (217) 782-5959

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01/12/2021 7:34 AM



	REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES
_	CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INF
1	Overwheels Barrents

✓ Quarterly Report (Check one:) Final Report (Fund balance on Line E must be \$0)

Amendment of the Report Indicated Above

JAN 1 2 2021

State Board of Elections Springfield Office

CHECK FOR ADDRESS CHANGE

COMMITTEE ID #

PO Box 84					
Shelbyville, IL 62565	13				
r ndk72@aal.aam	35901 - \ 3				
E-mail address: ndk72@aol.com	CHECK FOR E-MAIL ADDRESS CHANGE				
REPORTING PERIOD CASH AVAILABLE AT BEGINNING OF REPORTING PERIOD:	ALL POLITICAL COMMITTEES RETURN TO:				
10/1/20 12/31/20 \$1,628.14	STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR DOWN JAMES R THOMPSON CENTER 100 W RANDOLPH, STE 14-100				
FROM THRU Repeat this amount in SECTION D, Line (A)	SPRINGFIELD, IL 62704-4503 CHICAGO, IL 60601-3232				
SECTION A — RECEIPTS	SECTION B — EXPENDITURES				
1. Individual Contributions	6. Transfers Out				
a. Itemized (from Schedule A): \$(1a					
b. Not-Itemized: \$100.00 (1b	b. Not-Itemized: \$(6b)				
2. Transfers In	7. Loans Made				
a. Itemized (from Schedule A): \$(2a	a. Itemized (from Schedule B): \$(7a)				
b. Not-Itemized: \$(2b) b. Not-Itemized: \$(7b)				
3. Loans Received	8. Expenditures				
a. Itemized (from Schedule A): \$(3a	a. Itemized (from Schedule B): \$903.28 (8a)				
b. Not-Itemized \$(3b	b. Not-Itemized \$(8b)				
4. Other Receipts	9. Independent Expenditures				
a. Itemized (from Schedule A): \$(4a	a. Itemized (from Schedule B-9): \$(9a)				
b. Not-Itemized \$.19 [4b]	b. Not-Itemized \$(9b)				
TOTAL RECEIPTS (1a thru 4b) \$ 100.19 [TR	TOTAL EXPENDITURES (6a thru 9b)\$903.28 (TE)				
*************	* *************************************				
5. In-Kind Contributions	SECTION C — DEBTS AND OBLIGATIONS (Include previously reported unpaid debts)				
a. Itemized (from Schedule I): \$(5a)					
b. Not-Itemized \$(5b					
TOTAL IN-KIND (5a + 5b) \$ (TI)	TOTAL DEBTS & OBLIGATIONS \$				
****************	***************************************				
Name and address of person submitting this report if other	<u>SECTION D — CASH BALANCE</u>				
than the committee's Chair or Treasurer:	reporting period: \$ 1628.14 (A)				
•	Total Receipts from Section A (TR): \$100.19 (B)				
	Total cash (A) plus (B): \$\frac{1728.33}{2000} (C)				
	Total Expenditures from Section B (TE): \$-903.28 (D)				
	Funds available at close of reporting period (C minus D): \$825.05 (E)				
	Investments total (if applicable): \$(F)				

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND

OF COMMITTEE TREASURER OR CANDIDATE

1/6/2020

DATE

From: 102 Lori Fax: 12175288473

To:

Fax: (217) 782-5959

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NAME OF POLITICAL COMMITTEE:		REPORTING PERIOD			FOR OFFICE USE ONLY	
		10/1/2020	12/31/2020			
	-	FROM	THRU			
SCHE	SCHEDULE B					
EXPENDITURES						
CHECK THE PART OF	EING (TEMIZED:			POLITICAL COMMITTEE IDENTIFICATION No.		
PART #6 TRANSFERS OUT						
EXPENDITURES TO POLITIC COMMITTEES - INCLUDING RAFFLE PURCHASES			EXPENDITURE	<u> </u>	35901	
SEE PAMPHLET "/	A GUIDE TO	CAMPAIGN D	ISCLOSURE'	' FOF	GUIDANCE	4
ITEMIZED EXPENDITURES FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE OF EXPENDITURE	PURPOSE	BENEFICIARY	EXPE	UNT OF EACH NDITURE THIS EPORTING PERIOD	AGGREGATE AMOUNT THIS REPORTING PERIOD
A Sign Store & More PO Box 144 Stewardson, IL 62463	10/15/20	Campaign signs	Citizens For Nichole Kroncke	503.28	3	503.28
Gameday Screenprinting RR4, Box 6 Shelbyville, IL 62565	10/16/20	T-Shirts	Citizens for Nichole Kroncke	400.00		400.00
USE SEPARATE SCHEDULE B FOR EACH F	I PARTS 6, 7, & 8	<u>.l.,</u>	_l	TOTAI	THIS PERIOD	\$ 903.28